

## **PMP CHECKLIST**

	(Airport Name)	(AIP Project NO)		
	(Location)		(date)	
INV	ZENTORY CONTRACTORY	Voc. No.	Cmt	
1. 2. 3. 4. 5.	Location of All RW, TW & Apron Pavement Section (Surface/Base/Sub-base) Dimensions (L X W ) AIP project number Year of Construction or most recent rehabilitation Federal Funds to construct?	Yes No	Cmt	
INS	SPECTION SCHEDULE	Vaa Na	01	
<ol> <li>2.</li> </ol>	Detailed Inspection Annual unless PCI Survey then up to 3 year Drive By at least Monthly	Yes No	<u>Cmt</u>	
RE	CORD KEEPING			
1. 2. 3. 4.	Inspection Date Location Distress Type Maintenance Scheduled or Performed (History)	Yes No	<u>Cmt</u>	
INF	ORMATION RETRIEVAL		_	
1.	Appropriate Records available upon request	Yes No	<u>Cmt</u>	
PR	OGRAM FUNDING	Yes No	Cmt	
1. 5.	Annual Maintenance Budget 5 Year CIP		<u> </u>	
COMMENTS:				

Revised: September 2012